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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS

Application Number	10/824,291
Filing Date	4-14-2004
First Named Inventor	Jeffrey D. Muhs
Art Unit	1795
Examiner Name	Asha J. Hall
Attorney Docket Number	0735.3

I hereby revoke all previous powers of attorney given in the above-identified application.									
A Power of Attorney is submitted herewith.									
OR I hereby appoint the practitioners associated with the Customer Number:						ımber:	67253		
Please change the correspondence address for the above-identified application to: The address associated with Customer Number: 67253									
OR Firm o	r								
☐ Individ	lual Name								
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I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)									
SIGNATURE of Applicant or Assignee of Record									
Signature	/Judson R. Hi	ightower/							
Name	Judson R. Hig	ghtower							
Date	May 19, 2008	3		T	elephone	865.576.3767	7		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.									
*Total offorms are submitted.									

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